

<b>PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)</b> <b>FY 2009</b> <i>(Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).)</i>		Docket Number (Optional) <div style="text-align: center;">MERCK-3074</div>	
Application Number 10/552,065		Filed October 5, 2005	
For SUBSTITUTED PYRAZOLES			
Art Unit 1614		Examiner Christopher R. Stone	

This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.

The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):

	<u>Fee</u>	<u>Small Entity Fee</u>	
<input checked="" type="checkbox"/> One month (37 CFR 1.17(a)(1))	\$130	\$65	<u>130.00</u>
<input type="checkbox"/> Two months (37 CFR 1.17(a)(2))	\$490	\$245	_____
<input type="checkbox"/> Three months (37 CFR 1.17(a)(3))	\$1110	\$555	_____
<input type="checkbox"/> Four months (37 CFR 1.17(a)(4))	\$1730	\$865	_____
<input type="checkbox"/> Five months (37 CFR 1.17(a)(5))	\$2350	\$1175	_____

☐ Applicant claims small entity status. See 37 CFR 1.27.

☐ A check in the amount of the fee is enclosed.

☒ Payment by credit card via EFS.

☐ The Director has already been authorized to charge fees in this application to a Deposit Account.

☒ The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 13-3402.

**WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.**

I am the ☐ applicant/inventor.

☐ assignee of record of the entire interest. See 37 CFR 3.71  
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

☒ attorney or agent. Registration Number 50,908.

☐ attorney or agent under 37 CFR 1.34.  
Registration number if acting under 37 CFR 1.34. \_\_\_\_\_.

\_\_\_\_\_  
/Csaba Henter/  
Signature  
Csaba Henter  
\_\_\_\_\_  
Typed or printed name

\_\_\_\_\_  
August 12, 2010  
Date  
(703) 243-6333  
\_\_\_\_\_  
Telephone Number

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☐ Total of \_\_\_\_\_ forms are submitted.